

1652  
JPW

PTO/SB/83 (09-04)

Approved for use through 11/30/2005. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	09/902,525
	Filing Date	July 9, 2001
	First Named Inventor	Jay M. SHORT
	Art Unit	1652
	Examiner Name	R. Hutson
	Attorney Docket Number	564462001020

Commissioner for Patents  
**To:** P.O. Box 1450  
Alexandria, VA 22313-1450

Please withdraw me as attorney or agent for the above identified patent application, and

☐ all the attorneys/agents of record.

☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or

☒ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are:

This withdrawal is being made at the request of the applicant.

<b>CORRESPONDENCE ADDRESS</b>			
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	<input type="checkbox"/>	The address associated with Customer Number: <input type="text"/>	
<b>OR</b>			
<input checked="" type="checkbox"/>	Firm or Individual Name	Lynn Linkowski Diversa Corporation	
Address	4955 Directors Place		
City	San Diego	State	CA
Country	United States		
Telephone	(858) 526-5450	Fax	(858) 526-5950
Signature			
Name	Gregory P. Einhorn	Registration No.	38,440
Date	January 20, 2005	Telephone No.	(858) 720-5133
<small>NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.</small>			



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**OR**

☒ Firm or Individual Name  
Lynn Linkowski  
Diversa Corporation

Address 4955 Directors Place

City San Diego State CA Zip 92121-1609

Country United States

Telephone (858) 526-5450

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Signature

Name Gregory P. Einhorn

Registration No. 38,440

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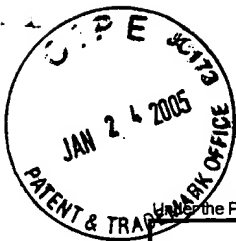
☐ The address associated with Customer Number:

OR

☒ Firm or Individual Name **Lynn Linkowski  
Diversa Corporation**

Address	4955 Directors Place				
City	San Diego	State	CA	Zip	92121-1609
Country	United States				
Telephone	(858) 526-5450		Fax	(858) 526-5950	
Signature					
Name	Gregory P. Einhorn		Registration No.	38,440	
Date	January 20, 2005		Telephone No.	(858) 720-5133	

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PTO/SB/21 (09-04)  
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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	09/902,525
		Filing Date	July 9, 2001
		First Named Inventor	Jay M. SHORT
		Art Unit	1652
		Examiner Name	R. Hutson
Total Number of Pages in This Submission	4	Attorney Docket Number	564462001020

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/Incomplete Application  <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____  <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter  <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Correspondence Address (1 page, plus 2 copies) Return Postcard Receipt
Remarks		
CUSTOMER NO. 25225		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Gregory P. Einhorn		
Date	January 20, 2005	Reg. No.	38,440

I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: January 20, 2005	Signature:  (Matthew Russell)